Credit Card Authorization Form

(Charges for cleaning of soft goods)

Please fill out, sign, and return this form to **SonShine Dry Cleaners**. **SonShine Dry Cleaners** must have this form on file to bill your credit card. At **SonShine Dry Cleaners** this form will be kept in a locked and secured location that is only accessible by the owner. Security is placed at high value, we simply want to make looking your best **Quick, Convenient, and Hassle-free!**

Date:
Customer Name:
Customer Phone Number:
Customer Email:
Credit Card Type (Circle One): MasterCard Visa
Credit Card Number: CVC:
Expiration: _____/_____
Name as it appears on the Credit Card (print):
Billing Address:
City: State: Zip:
Card Holder Phone Number: _____-_____-_____

Beginning _____(insert date) I authorize SonShine Dry Cleaner to initiate a recurring charge to the credit card indicated above for the total amount due each week for my SonShine Dry Cleaning services. Charges to my account may vary from week to week and will only be made when cleaning is complete.

I agree that the periodic charge will apply to my credit card according to my SonShine Dry Cleaning weekly billing cycle, and in order to cancel the recurring billing process, I am required to contact SonShine Dry Cleaners (14) days in advance to either cancel this form of payment and arrange for an alternative method of payment. I understand that SonShine Dry Cleaners will not mail me any invoices or bills SonShine Dry Cleaners will provide me with all receipts of all charges on a weekly basis upon delivery.

I agree that if I have any problems or questions regarding my account or any services provided by SonShine Dry Cleaners, I will contact SonShine Dry Cleaners for assistance at 319-665-2393 or email at sonshinedrycleaners@gmail.com. I agree that I will not dispute any charges with my credit card company without first making a good faith effort to remedy the situation directly with SonShine Dry Cleaners. I guarantee and warrant that I am the legal card holder for this credit card and that I am legally authorized to enter into this recurring credit card billing agreement with SonShine Dry Cleaners.

Printed Name:_____Date:_____

Signed Name:_____Date:_____